Township: Keep original and provide copy of both sides, along with Public Summary, to requestor at no charge.

Leland Township, Leelanau County PO Box 238 Lake Leelanau, MI 49653-0238

Phone: 231-256-7546 Ext. 201

Request Form Note: Requestors are not required to use this form. The township may complete one for recordkeeping if not used.

FOIA Request for Public Records Michigan Freedom of Information Act, Public Act 442 of 1976, MCL 15.231, et seq.

Request No.:	Date Received:	Check if rece	ived via: Email Fax	☐ Other	Electronic Method	
(Please Print or Type)	Date <u>delivered</u> to junk/spam folder: rint or Type) Date <u>discovered</u> in junk/spam folder:					
Name			Phone			
Firm/Organization			Fax			
Street	Email					
City	State Zip					
Request for:	☐ Certified copy ☐ Reco	ord inspection	☐ Subscription to reco	ord issued o	n regular basis	
Delivery Method: ☐ Will ☐ Deliver on digital media p	pick up	ies onsite [☐ Mail to address above	☐ Email t	to address above	
Note: The township is not required to provide records in a digital format or on digital media if the township does not already have the technological capability to do so.						
Describe the public record(s) as specifically as possible. You may use this form or attach additional sheets:						
					•	
5						
Consent to Non-Statutory Extension of Township's Response Time I have requested a copy of records or a subscription to records or the opportunity to inspect records, pursuant to the Michigan Freedom of Information Act, Public Act 442 of 1976, MCL 15.231, et seq. I understand that the township must respond to this request within five (5) business days after receiving it, and that response may include taking a 10-business day extension. However, I hereby agree and stipulate to extend the township's response time for this request until: (month, day, year).						
Requestor's Signature					Date	